

SLAUGHTER ADDENDUM

APPLICANT NAME:		CERTIFICATION NUMBER:	
FARM NAME:		COUNTY:	
1. SOURCE			
Record birth dates an	d/or dates of purchase for all livestock b	oorn or purchased in the previous ye	ar on the enclosed
Organic Livestock Inv	rentory Record.		
Do you raise replacer	nent slaughter livestock on the farm?	Yes No	
•	aised organically from the last third gesta	ation? Yes No	
Do you purchase slau	ıghter livestock? ☐ Yes ☐ No		
Do you maintain curre	ent organic certificates from each seller?	Yes No	
2. HOUSING AN	D PASTURE		
What type of housing	is provided for slaughter stock?		
Do slaughter stock ha	eve access to outdoors, shade, shelter e	xercise areas, fresh air and direct so	unlight? Yes No
If animals are subject	to temporary confinement, please list the	e reasons for the confinement for ea	ach type of animal:
			_
Do ruminants have ac	ccess to pasture?	ot applicable (no ruminants)	
	tion:		
3. FEED			
Record feed purchase	es on the enclosed Organic Livestock F	eed Record.	
Please describe your	feed rations for slaughter livestock:		
Type of animal	Type of feed	Amount of feed	Organic (X)
Do you raise feed on			
Have you treated any	animala with drugg or harmones to pro-		
Have you fed the live	•	_	
riave you led the live.	stock with any formulas containing urea	_	
4. SLAUGHTER	•	_	